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SIMILIA SIMILIBUS CURANTUR?

C. S. MACK, M.D.

It is better to debate a question without settling it,
than to settle it without debate." — *Joubert*.

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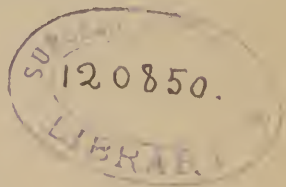
ADDRESSED TO

THE MEDICAL PROFESSION,

BY

CHARLES S. MACK, M. D. —

“It is better to debate a question without settling it, than to settle it without debate.”—*Foubert*.



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SIMILIA SIMILIBUS CURANTUR?

I.

I see nothing to accept or offer as positive, practical proof that similars cure ; on the other hand I see nothing to accept or offer as positive, practical proof that they do not. Until one has seen such proof *pro* or *con*, he is obliged to hold in abeyance the question of fact, whether similars cure. A question of opinion, however, which he must practically answer each time he treats a patient is, Is it worth while in this case to try to cure with a similar? I hope that in the following pages some light will be thrown upon this question of opinion.

When one states publicly what he thinks of homœopathy it is important, to himself at least, that in doing so he be very accurate. I shall therefore offer no apology for stating here what is my personal position in this matter. My experience with homœopathy has been very limited. A question which cannot be answered now is whether I shall ever be able to say that I know I have seen cures effected through similars. At present I cannot say this, and I suspect that the theoretical argument in favor of *similia* is

stronger than any practical evidence of a positive nature in individual cases which is obtainable today that similars cure. I say *of a positive nature*: the difficulty is, of course, that of distinguishing between recovery or improvement which has occurred independent of any influence from the medicine used, and recovery or improvement in effecting which the medicine has been instrumental. This difficulty obtains whether the treatment whose usefulness we would estimate has been homœopathic or non-homœopathic. I say, too, *in individual cases*: the question as to coincidence being less of an embarrassment in considering a number of cases than in considering a single one, absolutely accurate statistics of a large number of cases might afford valuable practical evidence for or against the efficiency¹ of a homœopathic drug to cure, but the difficulty of attaching proper weight to statistical evidence in medical questions must be recognized. In view of such difficulties one need feel no hesitation in expressing an opinion while he is not prepared to adduce facts for the support of it. I think no practice is more useful

¹ The question as to how much of a medicine should be given is aside from the subject of this paper. As a matter of fact, however, the attempt to cure with similars is usually made with small doses. If one is disposed to look upon the harmlessness of these doses as a practical argument in favor of homœopathy, let him, nevertheless, bear in mind that the harmlessness of a given treatment may have absolutely nothing to do with the question as to its efficiency.

today than one which has regard to *similia* as the law of cure, but which is ready in the treatment of any case to do what may in that case promise more of usefulness than does an attempt to cure; and that no other practice offers to medical science such a prospect of future progress as does that which has regard to *similia* as the law of cure.

Each of the words *homœopathy* and *cure* has attaching to it various meanings, and I wish to specify in what sense the words are used in this paper. The principle expressed in the formula *similia similibus curantur* is what the word *homœopathy* etymologically implies, and that principle is the subject of discussion in this paper. We shall use the word *homœopathy* as simply implying a recognition of that principle as law. We shall use the word *cure* as synonymous with the removal of disease by means which do not affect primarily a cause attacking man from without, but which do so modify the vital processes in a patient as to enable him to resist morbid influences. Cure thus defined does not necessarily involve the idea that a disease whose natural course is of definite duration shall, as a result of curative treatment, have its duration shortened. I am aware that there are those who, after long experience and very careful study, have come to believe that no such thing is possible as curative medicine. I think that such a conclusion is premature, if the theory of homœopathy is correct.

In defining *Poison* Webster says, "The ancient Greeks "employed the same word both for a medicine and a poison ;" he says too, "According to the popular notion, those articles "only are poisonous, which are capable of producing morbid, "noxious, or dangerous effects, in comparatively small quanti- "ties ; but there is no just foundation for such a distinction." Now, *similia* implies that any curative medicine is a poison — that if taken in sufficient quantity in health, it will produce morbid effects.

The difficulty of inducing with drugs effects which resemble in any considerable degree those of many diseases with which we have to deal is not to be blinked, but I think that a difficulty equally great, and of much the same nature, must be met by any practice which attempts to cure otherwise than empirically. This point will be touched upon again : let us for the present observe simply that the theory of homœopathy finds no obstacle here ; the difficulty is a practical one, and while it may embarrass one in the treatment of some cases, perhaps very many cases, it need not, I think, deter him from regarding *similia* as law. Some cases may be incurable for aught *similia* says.

There is no inconsistency in accepting the belief that in poisons we have curative medicines, and at the same time admitting that medicines may be useful which are not curative. If in anæmia the blood has not its normal amount of iron, and that deficiency can be supplied by

administering iron, well and good; but, though that iron is called medicine and not food, administering it is certainly a very different matter from prescribing a poison which we hope will by modifying the processes of the vital powers be an instrument of cure.² Chemically acting upon the contents of the alimentary canal, or, by means concerning which *similia* says nothing, removing parasites which have been introduced into that canal from the outside world is no more prohibited by *similia* than is mechanically removing from the surface of the body parasites or dust which have adhered to it in its contact with its surroundings. Under the same category come the cleansing of wounds and the killing of germs which have been introduced into them from without. *Similia* does not prohibit stimulating

² If the view supported by Dr. Richard Hughes is correct, the action of a medicine useful only in supplying to the system an element which is present in health and absent in disease does not fall under any law distinct from the laws of dietetics. [See his *Manual of Pharmacodynamics*, Fourth Edition, page 339.] Drugs useful in some such way as this may be indefinitely many,—preparations of lime or phosphorus may be among them: quinine may be one. [See “A contribution toward our knowledge of the pathological changes in the fluorescence of the tissues,” by Edward Rhoads, M. D., and Wm. Pepper, M. D., in the *Pennsylvania Hospital Reports*, Vol. 1, (1868) in which paper are recorded some observations upon effects of quinine sulphate.] If there is a curative medicine for such cases, it will so modify the processes of the vital powers that the deficiency, which is an effect of abnormal processes, will not persist.

a patient through the duration of an acute disease. It does not prohibit the use of palliatives: it says nothing about them. It does not say that morphine may not be used to relieve one from pain in any part of his body, any more than it says that ether may not be used to render him insensible for a surgical operation. It simply does not recognize this treatment as curative, and no more is it. These statements have been made, and these illustrations used almost *ad nauseam*, but no consideration of the claims of *similia* as law is complete which does not define accurately the borders of that field within which *similia* proposes to establish its claims.

The question may be raised, In removing a parasite from the alimentary canal do I not cure my patient? No, you do not, if you use the word *cure* with the meaning we have fixed upon as that which it shall have in this paper. Curative treatment does not affect primarily a cause attacking man from without. Your treatment is most useful, but it is prophylactic, not curative. In removing the parasite you remove the cause of whatever disturbance your patient's health has been suffering, and what would, had it persisted, have caused prolonged disturbance: it is probable that when this cause is removed his health will be reestablished without any curative treatment. *Mutatis mutandis*, the same may be said of local treatment in other parasitic diseases, of antiseptic treatment in wounds, etc.

In defining the meaning which *cure* should have in this paper I have not, of course, intended to repudiate accepted definitions of that word, and under some of those definitions treatment which removes parasites, or effects ends analogous to such removal is curative : indeed the etymological meaning of *cure* does not preclude palliation or even hygiene and nursing from recognition as curative treatment, but I find no impropriety in limiting the meaning which *cure* shall have while considering the claims of *similia*, as we have limited that field outside of which *similia* has no claims to assert.

Both Webster and Worcester authorize applying the word *cure* to persons or to diseases. One hears advocates of *similia* say that treatment under that law is a treatment of patients, and not of diseases. The idea is, I think, precisely correct. This treatment does not attempt to directly destroy those morbid agents which affect man from without,—when that can be done it is on principles other than the one of which *similia* speaks : what it does attempt is to effect a cure by so modifying the processes of the vital powers that they shall resist morbid influences.

Whether in every case disease has its cause in the external world of nature need not be discussed here. Where such cause exists it bears to the disease either the relation which the intestinal parasite does to the illness which his presence occasions, or that which an infectious germ does

to the disease to which it gives rise : the direct removal of that cause when practicable is prophylactic, and may leave the patient in circumstances to recover. Until that cause is discovered in the case of a given disease—and a fair question is whether all diseases have such a cause in the external world—or where the removal of that cause is impracticable, or where one is already infected in such a way that the removal of that cause will not relieve him, is it not reasonable to try to cure under guidance of *similia*?

II.

It is conceivable that pure empiricism, *i. e.*, practice without regard to any facts discovered by scientific investigation in the fields of anatomy, physiology, pathology, materia medica, etc., should bring us to regard certain drugs as curative in certain cases: it might from time to time hit upon a useful application of some principle without recognizing the principle itself. Grant that one shall have empirically hit upon a drug which is curative in a particular set of cases: his experience can throw light upon a law by which we can be guided to the choice of a curative medicine, only by showing the relation between facts which we can know before his curative remedy is given; for any law, if we are to be guided by it, states the relation between facts knowable to us, and if it is to lead us to the choice of a curative medicine, we must before selecting our remedy know those facts and what relation they bear to one another.³

³See Dr. Carroll Dunham's Essay, "Homœopathy the Science of Therapeutics."

Now what in any given case are these facts? The observations of Drs. Rhoads and Pepper in the Pennsylvania Hospital Reports for 1868 already referred to (see note 2), whether verifiable or not, suggest the possibility of a very wide application of some such principle as that upon which we give iron to supply a deficiency in the blood of an anæmic patient: they suggest, too, an answer well worth considering to our question. We may by scientific investigation learn that certain elements contained in certain drugs are present in tissues during health, but absent from them under the influence of certain diseases. Here, then, we might have what would at least partially fulfil the requirements of a law of cure for our guidance—the relation between facts knowable to us before a remedy is given. I see no reason why we may not hope for indefinitely great progress in the direction here spoken of; but I do, I think, see reason for believing that in this direction we shall never arrive at curative treatment. In supplying a deficiency resulting from derangement of vital processes we do not render those processes normal, a requisite to cure. Nor is it curative, however useful, to neutralize or remove disease products, abnormal processes persisting.

I am inclined to agree to the opinion that the facts between which a law of cure would define the relation are effects upon the system producible on the one hand by the disease in question, and on the other hand by the drug or

drugs (taken in health) for which it calls.⁴ The reason for thinking that it is in their effects alone that disease and drugs afford the knowable data of which a law of cure would speak is that in either case an agent in the production of these effects is life, and that we are therefore as incapable of knowing all about the power operating these effects as of knowing all about life itself. It may be proper to think of disease as something immaterial, and of symptoms subjective or objective, including pathological changes, as manifestations of disease but not disease itself. It is, however, merely a

⁴ In confining our attention to the question as to a law in accordance with which drugs are curative, we would not imply an opinion as to whether cure without drugs is possible: mind cure, faith cure, etc., are what we allude to.

We shall not discuss here the question whether it may be useful to give drugs alternately or mixed, one for one part and another for another part of co-existing disease effects. If polypharmacy is admissible, it is proper that each ingredient in a mixture should be separately considered.

Of the effects producible by a drug I say *when taken in health*. When one's object in prescribing a drug is something else than to act upon an external cause of disease, or to supply to the tissues elements present in health but absent in disease, he must, it seems to me, unless he be guided by pure empiricism, have regard to what effects that drug is capable of producing when its action is unmodified by disease. I am far from desirous to maintain the accuracy of all those provings which purport to be records of symptoms produced by drugs, but I think the method reasonable which, to ascertain the effects producible by a drug, administers it in health and observes what as a matter of fact are its effects. We may ascertain these same drug effects, when possible, by

question of definition what we call disease, but a question of importance is whether we can know all about a disease — its prime cause, all the detailed effects of that cause, and all about the power by reason of which this cause leads to these effects. I think we cannot. To cure, excepting by chance or under guidance of a law, would imply, it seems to me, a superhuman grasp of the subject with which we are dealing. However great and useful our knowledge of disease effects unmodified by drug effects and of drug effects

distinguishing them from disease effects where disease and a drug have operated at the same time. However reasonable the method of proving poisons upon healthy human beings, certain limitations must obviously be placed upon its practice. A knowledge of effects observed ante-mortem and post-mortem in poison cases, as well as the effects which drugs produce in the lower animals, is as available in homœopathic as in non-homœopathic practice, unless proper indications for the selection of a curative remedy are to be found in subjective symptoms only, a limitation which I at present see no sufficient ground for accepting. In short, so far as concerns unmodified effects producible by drugs, the facts before us are the same whatever our theory of practice.

That which experience may have taught us to look upon as the curative effect of a drug in cases similar to the one under treatment is not admissible among the knowable facts of which a law would speak, even if our belief that the drug was curative is correct, for a law does not particularize instances illustrative of the principle which it states. I would not, however, withhold respect due to the teachings of experience. I recognize the propriety of following the dictates of pure empiricism where they lead to useful practice, and that experience is the tribunal before which the claims of *similia* as the law of cure for our guidance must finally be vindicated or resigned.

unmodified by disease effects, it can, I think, never enable us to cure, unless under guidance of a law.

If a law of cure defines the relation between effects producible by a disease and those producible by the drug (taken in health) which can be an instrument to its removal, that drug must, I think, be capable of producing effects identical with or similar to those of the disease, or opposite to those of the disease, or similar to these opposites : I see no relation other than one of these, which the drug effects could maintain to the disease effects. If this view is correct, there is, it seems to me, a fair argument by exclusion in favor of homœopathy. Let us consider the claim which each of these relations might make to being that which a law of cure would define.

It is probable that no disease taken as a whole is opposite to any other disease taken as a whole : health is the opposite of any disease and in health is found the opposite of any symptom. Still it is perfectly proper to speak of one disease symptom as opposite to another, for the word *opposite* is used with different meanings : the symptom of feeling warm is opposite to that of feeling cold, a too rapid action of the heart is opposite to a too slow, the symptom of dilatation of an arteriole is opposite to that of contraction. When we say that one symptom is opposite to another, we mean that the two vary in diametrically opposite directions from the standard found in health. When we say that in health is

found the opposite of any symptom, we use the word *opposite* with the meaning which attaches to it when we say that positive is the opposite of negative, or that good is the opposite of evil.

Health is opposite to disease as good is to evil, or truth to falsity. The analogy which this suggests, even if it possesses no weight as an argument, may serve to illustrate the theories which we shall consider. As there are symptoms opposite to symptoms while the opposite of any symptom is found in health, so there are evils opposite to evils (*e. g.*, miserliness and prodigality), while in good is found the opposite of any evil, — falsities opposite to falsities (*e. g.*, an overstatement and an understatement in regard to a fact), while in truth is found the opposite of any falsity. To attempt to cure with a medicine which taken in health would produce symptoms opposite to those present is like attempting to remove one evil by introducing the opposite evil. It is sometimes said in favor of antipathic treatment that whatever life and power man has he receives from the Prime Source of life and power, and that it is reasonable to try with medicines to force a diseased body into such condition that life and health can flow into it. The idea is, of course, that in the approach toward symptoms opposite to those present a point may be reached where the condition will be that of the standard found in health. I think there is a fallacy here. The analogy would be with the attempt to

reform a miser by forcing him toward prodigality until his expenditures were made with proper freedom and proper care. An effect of this attempt might be to conceal his miserliness, but I should consider it perfectly futile as a means to his radical reform. A miser recognizing his miserly disposition may aid in its removal by leading of his own free will an outward life into which goodness can flow from the Prime Source of all goodness, but if he is radically reformed prodigality will have nothing to do with the effecting of his new life: the new life he enters upon will be in no degree opposite to the old in the sense that one symptom is opposite to another; it will be opposite in the sense that health is opposite to disease. The question which concerns us at this point is not whether antipathic treatment can ever be useful, but whether it can be curative; I think it cannot.

The objections to attempting to cure with a drug capable when taken in health of producing symptoms precisely opposite to those of the disease in question would obtain to attempting to cure with a drug capable of producing symptoms similar to these precise opposites.

There is no such thing as a drug antipathic in the sense that it is capable of producing health, the opposite of disease — no drug can create health: such a drug would be a remedy for all diseases, a universal medicine, a panacea.

The theory of isopathy leads directly to an absurdity. The word *isopathy* has in this paper no reference to what

Dimglison defines as "the cure of disease by the disease itself or its products." By *isopathy* we mean the theory that a curative drug should be capable of producing effects identical with those of the disease which calls for it, though the proximate cause of the drug symptoms is not identical with the proximate cause of the disease symptoms.

If, then, we can exclude as non-curative, antipathic drugs capable of producing effects precisely opposite to those present, and drugs capable of producing effects similar to these precise opposites; and if, too, that kind of antipathy which involves a panacea, as well as isopathy, is out of the question, I see nothing left which can possibly be a system of curative medicine founded upon law excepting homœopathy: for be it remembered that we expect a law of cure to define the relation which the effects producible by a drug must bear to those producible by the disease which calls for it; and what can the defined relation be, if the effects producible by the drug are not identical with or similar to those producible by the disease, or identical with or similar to the precise opposites of the disease effects? A drug capable of producing a condition similar to the opposite, health, is, if its effects bear any relation to those of the disease and are not similar to the opposites of these latter, homœopathic; for any deviation from health in these drug effects involves, if they bear any relation to the disease effects, a similarity to these disease effects or to their oppo-

sites. A drug capable of producing effects similar to disease effects present is, of course, homœopathic. If the analogy we drew in considering antipathy is admissible as an argument (I think it is), and if we have made no mistep, the law of homœopathy is not only a law of cure, if such a law exists, but it is the only one.

To sum up the points we have suggested for an argument by exclusion in favor of homœopathy: if a law of cure exists, we suspect it must define a relation among those represented in the following lines; we think that the relations represented by starred lines can be eliminated, and that the only unstarred lines represent the relation endorsed by *similia*:—

*Drug capable of producing effects precisely opposite to disease effects.

*Drug capable of producing effects similar to symptoms precisely opposite to those of the disease.

*Drug capable of producing the antipathic condition, health.

Drug capable of producing a condition similar to the antipathic condition, health, and having some relation to disease effects, but affording no similarity to symptoms opposite to those of the disease.

*Drug capable of producing effects identical with those of the disease.

Drug capable of producing effects similar to those of the disease.

The difficulty of producing drug effects similar to the effects of some diseases has been alluded to (page 6). Surely

a degree, at least, of similarity in effects producible by a drug to those producible by the disease which calls for that drug is a far less severe criterion to exact than identity with the disease symptoms or with their precise opposites would be, and it is no more severe, I think, than would be that of similarity to symptoms precisely opposite to those of the disease.

A enters a room blindfold and presumably ignorant as to the whereabouts of an object which B has hidden. He takes B's hand. B's endeavor is to in no way influence A's movements. A presently leads B to where the object is. In attempting to explain this phenomenon it has been suggested that B involuntarily coerces A when he would proceed in a wrong direction. Whether satisfactory or not as explanatory of the phenomenon which has called it forth, the suggestion affords an admirable illustration of one position which I think tenable in regard to homœopathy. Those of us who do not feel that we have seen in practice proof that similars cure may still search for a law of cure: if we essay to go in any direction other than that toward *similia*, reason, it seems to me, will not permit us to budge: toward *similia* we may, I think, proceed without restraint.

It is not my object in this paper to give a conclusive argument in favor of *similia*. If it were, I should have, among other things, to justify the analogy between cure and radical reform, and to prove correct a view which seems to me

reasonable and acceptable as to what is essential to such reform. My object rather is to present some of the considerations by which I am led to think that *similia* is the law of cure, that regard to it as such offers to medical science a prospect of future progress such as denial of it precludes, and by which I am led to try to cure with similars. Among those considerations is the following — that the theory of homœopathy offers points of analogy, as it seems to me, with what are essentials to radical reform, — points of analogy, too, with some of the means afforded organic beings for their growth in strength.

It is not unlikely that some will be reminded by this analogy of the remark made years ago that homœopathy is a religion, not a science. To undertake to prove by analogy from dogmas as to what are essentials to radical reform that similars cure would, of course, be entirely unwarrantable ; but so far as the views concerning reform are reasonable and recognize principles they may, I think, throw light upon the question whether it is worth while to try to cure with similars. However proper it is to be cautious about accepting the analogy as an argument, it is equally proper to bear in mind that truths in regard to any two subjects will at least never conflict. I have no wish to urge an acceptance of the views presented in this paper : I wish simply to offer them, and to let them go for what they are worth, and to

remain free, myself, to admit whatever force views counter to them may have.

There is one point I should like to speak of before presenting the analogy alluded to. I do not think the theory of homœopathy at all less acceptable because of our not comprehending how a cure can be effected through the instrumentality of a similar. Do we, or can we comprehend why any effect of which a law of nature speaks is such as it is? Is it not characteristic of a law of nature to speak of processes or effects of a power which we cannot comprehend? I quote from page 5 of "Natural Law in the "Spiritual World," by Henry Drummond: "The Natural "Laws originate nothing, sustain nothing; they are merely "responsible for uniformity in sustaining what has been "originated and what is being sustained. They are modes "of operation, therefore, not operators; processes, not "powers. The Law of Gravitation, for instance, speaks to "science only of process. It has no light to offer as to itself. "Newton did not discover Gravity—that is not discovered "yet. He discovered its law, which is gravitation, but that "tells us nothing of its origin, of its nature, or of its cause." In the sense that Gravitation tells us nothing of the origin, nature or cause of Gravity, *Similia* tells us nothing of the origin, nature or cause of Cure: in the sense that Gravity is not yet discovered, Cure would not be discovered by proving *Similia* to be the law of cure. If we could comprehend

how a cure was effected through a similar, we should, I think, be obliged to conclude that, though the statement contained in the formula, *similia similibus curantur*, was true, the truth stated was not a law of nature. A law of nature when known is something upon which man can rely in precisely those circumstances where his powers of comprehension are inadequate.

On page 7 of Mr. Drummond's book are these words—"That the Phenomena of the Spiritual World are in analogy "with the Phenomena of the Natural World requires no re-statement." There is a system of philosophy which leads to the conclusion that the spiritual evils in our surroundings afford us the opportunity of, by resistance in temptation, becoming freed from the evils which are in us: this conclusion is to me acceptable, and analogous to it would be the following—that in poisons are afforded means by which we may be freed from bodily disease.⁵

The theory of homœopathy seems entirely agreeable to the belief that we are recipients of life from the Prime Source

⁵This idea—that the endeavor to utilize poisons as instruments of cure is analogous to the endeavor to utilize evils in our surroundings as means to radical reform—is introduced here from a paper on "The Use of Poisonous Drugs," in the New Jerusalem Magazine for March, 1883. The idea has appealed to me so forcibly as to make me feel that those of us who have not seen what we consider positive, practical proof that curative medicine is possible make a mistake, if we despair of finding that it is so.

of life, and, if cure occurs, recipients of the health which replaces disease. This belief seems to me reasonable, as does also the belief that we receive from that same Source whatever goodness replaces our evils in case of radical reform. If these beliefs are correct, man, to be radically reformed, must confess his sins: the strength to shun the evils to which he inclines, and the goodness which replaces in him the evils from which he is radically reformed must come from the Prime Source of good. A recognition of this dependence and a confession of sins are essentials of prayer. It seems as if one does in taking a homœopathic drug that which is analogous to confessing a sin. If the question were raised, Does not the analogy demand at this point and other points an isopathic drug? I should say I think it does not. In confessing a sin man does not fully comprehend just what his evil is: such comprehension would be possible to the Infinite Being alone, and He cannot sin. In confessing a sin one cannot, I think, recognize it for just what it essentially is.⁶

⁶ If at this point the analogy demanded that a drug to be curative must be isopathic, we should have, I believe, if we accepted the analogy, to abandon the attempt to cure with similars,—or indeed to cure with drugs at all, for I believe that drugs and disease cannot produce identical effects.

Would the drug be isopathic or homœopathic, the taking of which would be analogous to confessing a sin? If in confession one images to himself precisely what his sin is, the analogy demands an isopathic

Our dependence upon a Source above ourselves for what goodness is in us seems to be implied in the fact that the

drug. Absolute truth in regard to a sin is unattainable by man: so far as it is a means to his deliverance it is applied by the Infinite Being. The truth which man applies is necessarily imperfect. If my view is correct, *similia* recognizes different drugs as in different degrees curative in the same circumstances: the greater the similarity between the effects of a disease and those of a drug, the greater the efficacy of that drug as an instrument of cure: the more nearly perfect the image we attain of what a sin is, the more useful such imaging.

Evil has in its very nature that which renders it unapproachable by the only Perfectly Good Being. By analogy the effects of disease or, what would be the same, those of a drug isopathic to it would have in their very nature what would keep them and a perfectly good being forever apart. Where one is so depraved that he cannot be reformed the attempt to forcibly control him is in order, and, by analogy, where one is incurably diseased antipathic treatment may be useful. I think that neither isopathy nor antipathy finds any analogue in the process of radical reform or any place in curative treatment.

At one extreme of three states of affairs, which are at least supposable, we might have a perfectly good being, and evil: these would have in their respective natures what would keep them apart. At the other extreme we might have those irredeemably bad, and evil: these would have in their respective natures what would render them inseparable. Between these extremes we might have a being who, unlike the perfectly good being, should fall into evil, but into evil from which he, unlike the irredeemably bad, might be delivered, and, what would I think be analogous, into disease of which he might be cured. A drug whose effects bear any relation to those of a disease in question, but which does not supply a deficiency which that disease has caused (see note 2) must, I think, be isopathic, antipathic (or approximately so) or homœopathic. It seems to me that homœopathy is the one system under which we may, by analogy and exclusion, hope for guidance to a curative medicine.

Commandments, excepting where they teach our dependence, tell us almost, if not quite, exclusively of the things we are *not* to do, and the theory of homœopathy seems in keeping with the principle thus implied.⁷ May not a homœopathic drug exhibit⁸ to what of health and strength remains in the system an image of effects to be shunned, and would not this be analogous to what the Commandments do in so far as a negative form obtains in them? Whether cure or radical reform be the thing sought, strength to shun forbidden ground must come, if at all, from that Source upon which we are dependent for all our strength. It seems as if the principle of which we here speak were illustrated in the form of those civil laws which, to prevent wrong-doing, prescribe⁸ what shall *not* be done, or of the command to a child *not* to do so and so.

⁷ In "Dred," by H. B. Stowe, one of the characters has been attempting to support the institution of slavery by referring to Bible History. "'Well,' said Clayton, 'the greatest evidence to my mind of the inspiration of the Scriptures is, that they are yet afloat, when every new absurdity has been successively tacked to them.'" The isolated fact that this negative form prevails in the Commandments would, perhaps, have no significance, but there are those who think that a principle is illustrated in this fact. Swedenborg says, "But the reason why such things as relate directly to love and charity are not commanded, but that it is only commanded that such things as are opposed to them should not be done, is that in so far as a man shuns evils as sins in so far he purposes the goods which are of love and charity."

⁸ These words *exhibit* and *prescribe* are used in speaking of drugs: we *exhibit* or *prescribe* a medicine.

We speak of a homœopathic drug's appealing to what of health and strength remains in the system : it is to what is good in one that we appeal, if we would reform him, not to what is bad. If as an effect of abnormal processes arterioles are dilated, the aim in exhibiting a homœopathic drug would not be to forcibly contract them : it would be to appeal to the remnant of health and strength that through it processes which are abnormal might be so modified as to become normal. If this attempt were successful, the dilatation of the arterioles, which is an effect of abnormal processes, would not persist.

The fact just alluded to, that no attempt is made with a homœopathic drug to force a cure, corresponds with what is to me an acceptable feature in the theory of homœopathy. We have spoken of man as a recipient of what goodness is in him : a mere passive recipient, however, he is not, for if he is to be radically reformed, he must be in freedom to do right or to do wrong ; an essential to radical reformation is that one should in freedom choose to do right. If radical reform could be forced upon one, the reformation of criminals would, perhaps, be a less difficult matter than it is. It is reasonable, I think, to believe that neither radical reform nor cure can be forcibly induced.

Without trials or temptations one cannot grow stronger. Trying experiences are good medicine. An essential to radical reform is that one be subjected to temptation, and

be left free to resist or to succumb. The attempt to cure with a homœopathic drug seems analogous to subjecting one to temptation, and at the same time leaving him in freedom.⁹ The power to resist in temptation, or to be radically reformed, or to be cured of disease one can possess only as he receives it from the Prime Source of power.

I said it seemed as if the theory of homœopathy offered points of analogy with some of the means afforded organic beings for their growth in strength. It seems to be by reason of one and the same principle that man is strengthened in good by resisting in temptation, that muscles are strengthened by use and that oaks are strengthened by withstanding storms. Men, muscles and oaks receive their life and strength from the same Source. We are not, I think, confounding in this paragraph a principle applicable in health exclusively with one applicable in disease exclusively. I suspect that there is a general principle, a particular application of which is the subject under discussion in this paper, — that to this principle a being dependent for life upon a Source above itself is universally subject, and that the principle is no more suspended during health than are the

⁹ Swedenborg says, "For in temptation man, to appearance, is left to himself alone; and yet he is not left, for God is then most present in his inmost parts, and supports him." Neither here nor in note 7 do I ask that Swedenborg be accepted as authority, but are not the ideas expressed in the quotations reasonable?

laws of hygiene during disease. That man often succumbs in temptation, that muscles may be overtaxed and that oaks are sometimes blown down does not, I think, vitiate whatever force the analogy suggested may possess ; for, however useful poisons may be, they are unquestionably capable of doing harm.

It is only after considerable hesitation that I present to the medical profession the analogy drawn in this paper. The cause of my hesitation will be readily guessed. The analogy deals on one hand with topics upon which it is certainly well, as a rule, to keep one's views as inconspicuous as possible when those topics are not immediately under consideration. Views upon these topics are diverse, and discussion of them is often unprofitable. It will serve our purpose in this paper to regard any views expressed as simply opinions, and as in no respect points of unalterable belief, for the question with which we are primarily concerned is one of opinion, viz., whether it is worth while to try to cure with similars. I strongly suspect that the analogy presented may throw light upon this question ; let this be my apology, if one is due, for offering it. "Nothing could
"be more false both to Science and to Religion than attempts
"to adjust the two spheres by making out ingenious points
"of contact in detail. The solution of this great question
"of conciliation, if one may still refer to a problem so
"gratuitous, must be general rather than particular. The

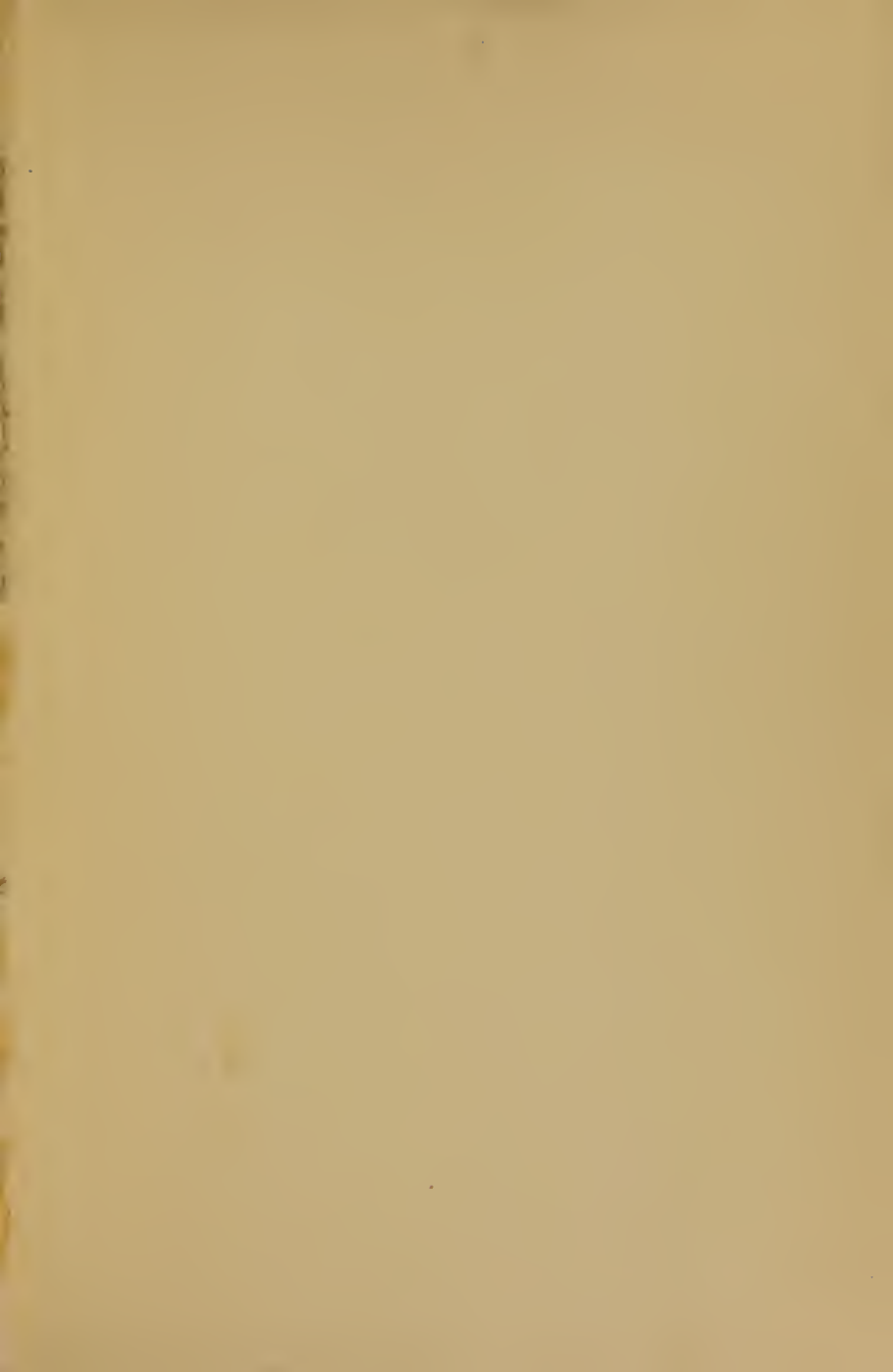
“basis in a common principle — the Continuity of Law — can alone save specific applications from ranking as mere coincidences, or exempt them from the reproach of being a hybrid between two things which must be related by the deepest affinities or remain forever separate.” [“Natural Law in the Spiritual World,” p. xii.] “Certainly I never premeditated anything to myself so objectionable and so unwarrantable in itself, as either to read Theology into Science or Science into Theology. Nothing could be more artificial than to attempt this on the speculative side; and it has been a substantial relief to me throughout that the idea rose up thus in the course of practical work and shaped itself day by day unconsciously.” [*Ibid.*, p. x.] An attempt to prove by analogy from “the speculative side” that similars do or can, as a matter of fact, cure would be altogether different from an attempt by analogy to get light upon the questions, — Is it worth while to try to cure with similars? Is it better today to deny the claims of *similia* or to test them further?

Among them who consider it probable that no universal law of cure exists are those who think that mercury cures¹⁰ syphilis and that quinine cures¹⁰ malaria. I know no established fact concerning the effects of mercury upon syphilitic

¹⁰ Here we use the word *cure* without reference to the particular meaning fixed upon as that which it should have in this paper.

patients which militates against the belief that *similia* is the law of cure. One who has never read, with this question of *similia* in mind, what is said under "Physiological Action" on pages 737, 738 and 739 in "The National Dispensatory" [Stillé and Maisch : 1880] may find there much which, I think, does not, at least, oppose the belief that similars cure. If the suggestion, already referred to, concerning quinine sulphate in Vol. 1 of the Pennsylvania Hospital Reports (1868) is virifiable, one need not, to account for quinine's being useful in the treatment of malarial patients, demonstrate a similarity between its effects and those of malaria. One in accepting *similia* need not reject the use of these drugs.

While, then, I see nothing to accept or offer as positive, practical proof that similars cure or that they do not, I am disposed to try to cure with similars excepting where non-curative treatment promises more of usefulness than does an attempt to cure. I am equally disposed, however, to urge the importance of exercising the utmost care when the question of fact is up, whether in a given case satisfactory results bear to treatment with similars the relation of effect to cause.



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